



**ASSIGNMENT OF TIME DEPOSIT**  
(Washington State Banks Only)

FUEL TAX SECTION  
P.O. BOX 9228  
OLYMPIA WA 98507-9228

This assignment is for the purpose of fulfilling the fuel tax bonding requirements. The undersigned does hereby assign, transfer and set over unto the State of Washington all rights, title and interest in and to a **Certificate of Deposit**, or other financial deposit,

Number \_\_\_\_\_ in the amount of \_\_\_\_\_

in the \_\_\_\_\_  
(Financial Institution/ Bank Name/ Branch/ Address)

with full power and authority to demand, collect and receive said deposit and give receipt and acquittance therefore, for the uses and purposes prescribed by said Revised Code of Washington (RCW) 82.36.060(7) Motor Vehicle Fuel, RCW 82.38.110(8) Special Fuel and/or RCW 82.42.040 Aircraft Fuel (circle as appropriate).

It is understood and agreed that \_\_\_\_\_ holds the said time  
(Financial/ Bank Institution)

deposit in its possession and agrees to hold \$ \_\_\_\_\_ until a release of this assignment is received from the Washington State Department of Licensing. It is understood that interest earned shall be payable to the depositor. The deposit shall be released to the State of Washington after twenty (20) days notice and demand and with no other conditions of release.

Name of depositor/licensee \_\_\_\_\_

Signature \_\_\_\_\_ Fuel Tax License No. \_\_\_\_\_  
(IDENTIFY - Individual/ Partner/ Corporate Officer/ LLC or LLP Member)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**ACCEPTANCE**

(To be completed by bank personnel)

Certificate of Deposit is insured by \_\_\_\_\_  
(FDIC/ FSLIC/ WCUSGA)

to a maximum of \_\_\_\_\_ and matures on \_\_\_\_\_

The undersigned hereby accepts the foregoing Assignment of Time Deposit and agrees to hold the funds until an authorized release is received from the Washington State Department of Licensing. **A PHOTOCOPY OF THE CERTIFICATE IS ATTACHED.**

Signature \_\_\_\_\_ Title \_\_\_\_\_

Bank Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

NOTARY SEAL OR STAMP	<b>NOTARIZATION / CERTIFICATION</b>	
	Signed or attested before me on _____	
	State of _____ County of _____	
	by _____ Printed Name of Person Signing Document	Signature _____ Notary Signature
	Notary's Name ( <b>PRINTED or STAMPED</b> ) _____	
	Title _____ Notary	Notary Expiration Date _____

**RELEASE ON REVERSE**

**RELEASE OF  
ASSIGNMENT OF TIME DEPOSIT**

TO WHOM IT MAY CONCERN:

The Fuel Tax Section of the Washington State Department of Licensing hereby releases, reassigns, and transfers all rights, control and interest in the identified \$ \_\_\_\_\_ time deposit, number \_\_\_\_\_, assigned to the department on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ Year.

\_\_\_\_\_  
FUEL TAX REPRESENTATIVE

FUEL TAX SECTION  
(360) 664-1852